

License Year:

# City of Bedford Business License Application

Account #

Contact Person:

Location Address:

Business Phone #:

Fax #:

Mbl. Or Alt. Phone #:

Applicant Name & Address:

Trade Name:

Federal ID Number:

Begin Bus. Date:

License Number

Prior Year Estimate:

Comments:

License Category

Located (City or County)

Lic. There?

VA Cont Reg# / Class / Expires

## Gross Receipts License Information

(1) Previous Year Gross Sales or Revenue from Business OR \$ \_\_\_\_\_

(2) Previous Year Gross Purchases  
(for Wholesale Merchants Only) \$ \_\_\_\_\_

(3) Adjustments ( - or + ) \$ \_\_\_\_\_

(4) Taxable Receipts (Line 1 or 2 minus line 3) \$ \_\_\_\_\_

**OATH:** I, the undersigned, do swear (or affirm) that the foregoing figures and statements are true, full and correct to the best of my knowledge and belief.

\_\_\_\_\_  
Signature of Applicant or Authorized Agent  
E-mail Address:

\_\_\_\_\_  
Date

\_\_\_\_\_  
Phone

If no longer in business, please check box ( ) and give date business closed \_\_\_\_\_, sign and date above, provide information for the new owner and return the license application.

## RATES:

## TAX CALCULATIONS/FEES

Taxable Receipts (4) from above multiplied by:

AMOUNT OF TAX \$ \_\_\_\_\_

If the amount of Taxable Receipts is less  
than the tax is

PENALTIES (10% of tax) \$ \_\_\_\_\_

If License is based on flat fee multiply number  
of units by

INTEREST \$ \_\_\_\_\_  
(Assessed by Treasurer)

All License Expire December 31

License must be paid (postmarked) by the due date or a  
10% penalty of the tax is assessed. DUE DATE:

TOTAL TAX DUE: \$ \_\_\_\_\_

This License shall not be valid or have any legal effect unless and until the taxes prescribed by law (and penalties and fees), as shown on the foregoing application and hereon, be paid to the Treasurer of The City of Bedford, and the fact of such payment appear on the face of a separate certificate of license issued at the time of payment.

ONE COPY OF THIS SIGNED APPLICATION MUST BE RETURNED WITH PAYMENT

VALERIE N. WILSON, COMMISSIONER OF THE REVENUE, CITY OF BEDFORD, 215 E MAIN ST, BEDFORD VA 24523; (540)587-6051